Liebelt, Annabel G. 1998

Dr. Annabel G. Liebelt Oral History 1998

Download the PDF: Liebelt_Annabel_Oral_History_1998 (PDF 252 kB)

National Cancer Institute History Project

Interview with Annabel G. Liebelt

Conducted on June 17, 1998 by Gretchen Case

at Dr. Liebelt's home in Gaithersburg, Maryland

GC: This is Wednesday morning, June 17, 1998, at about 10:00 a.m. This is Gretchen Case of HAI interviewing Annabel G. Liebelt. I just wanted to start out by asking you a little bit about your background: Where you got your education and how you came to the NCI.

AL: I was Annabel Glockler at that time. I went to Western Maryland College in Westminster, Maryland. Received a degree in biology with minors in English and philosophy. And I wanted to work for the government. I had worked several summers for the government. So, I applied and I didn't realize it would take a year for processing the job. Meanwhile I worked at Woodward and Lothrop's. [Laughs] The old Woody's, downtown. And finally the job came through in the National Cancer Institute, in the Pathology Department. The head of that department was a man, Harold Leroy Stewart, aka "Red" Stewart. You've heard of him, of course.

GC: Yes.

AL: I worked for three years in that Department, 1949-52 (the early years), part of the time at the Warwick Clinic in downtown D.C., where some of us (including Drs. Leighton, Symeonides, Loustalot, and Mori-Chavez) were sent because "they were needing to fill up some space down there." Also, we were a little crowded in Building 8, one of the original buildings on the campus. The Warwick Clinic was near the New York Avenue Presbyterian Church (13th Street and New York Avenue) and, as I remember, adjacent to the old Doctors' Hospital.

There were a number of pathologists in the Department in Building 8. Many were associated with the Public Health Service. I was fortunate to work with several different people on different organ systems [Dr. Harold Steffee, lungs; Dr. A. Hilberg; Dr. E. Saxen, stomach; Dr. P. Mori-Chavez, ovary; Dr. C. Congdon, several bone, hematopoietic; Dr. P. Loustalot, mammary gland; and Dr. A. Symeonides, several]. We did research on several species of animals with various carcinogens, dietary carcinogens, chemicals that we painted on the skin or fed by stomach tube. Then we followed the animals and watched them for their tumor development. I did most of the autopsies and took the sections for histological processing and often took the animals for photography—to go into the papers that the doctors were publishing. So I learned so much, and it just turned me on completely and that was what I wanted to pursue. Other members of the pathology group were: Dr. Thelma Dunn, endocrine and reticular tissue, Dr. Wavredecker, Dr. A. Mulay, Dr. E. Murphy, female reproduction tract; Dr. W. H. Eyestone, Dr. L. Dunham, Dr. Harlan Firminger, Dr. Margaret Deringer. Other Building 8 researchers were Dr. R. Malmgren, immunology; Dr. H. Andervont, biologist, Dr. W. Heston, genetics, and Dr. Clyde Dawe (after my years).

But during that third year, Dr. Stewart, as well as other men in the department, such as Dr. E. Murbly, encouraged me to go for a master's degree and they gave me the names of several people to be interviewed by. I had one of my older brothers in the Chicago area, so I decided that that's where I would go. I went to Argonne National Laboratory (Dr. Austin Brads), University of Chicago Medical School (Dr. Charles Huggins, who later received a Nobel prize), and University of Illinois Medical School in Chicago. The third one was the one I chose, to work with Dr. Arthur Kirschbaum, who was a Ph.D., M. D., anatomist. He was head of the Department of Anatomy at that school, but also an experimental pathologist. The reason that I decided to go there was I wanted to continue work similar to what I had done at the Cancer Institute, and the job would also allow me to teach and to get my master's degree all at the same time. So it was a perfect academic situation. I was there for two years. By then Dr. Kirschbaum had me even more excited about staying in cancer research and allowed me to go to local and national meetings in cancer [research]. There was no turning back for me at that point.

Well, meanwhile I met somebody in histology class—we were dating—going up and down the elevator getting our doughnuts and coffee during class break and so forth and decided to get married. But Dr. Kirschbaum had been offered a job at Baylor College of Medicine, in Houston, and wanted me to go because I was his chief mouse technician. I got married and we all moved to Houston in August, in the heat and humidity. My husband continued in Medical School. I finished up my master's degree and went back and got that in Chicago, but also started working on my Ph.D.

GC: At Baylor?

AL: At Baylor College of Medicine in Houston. In the Anatomy Department. And worked full-time as well. Supported my husband's getting his Ph.D. and M.D. degrees at the same time. And then had my family of four. My Mom and Dad moved from D.C. to Houston; Dad died shortly thereafter and Mom moved in with us. What a good friend and helper to me during those busy years. We were there seventeen years as the Texas Medical Center grew. Dr. Kirschbaum only lived four years there, so I "inherited" his mouse colony which I supervised for about thirty years. We had up to twenty-two different inbred strains of mice, a breeding colony, and we sent mice all over the world. Of course, many of the people in the Texas Medical Center used these animals as well for their research. We did collaborative studies with Drs. L. Dmochowski and J. Sykes at M.D. Anderson Hospital (and Tumor Institute), and several researchers at University of Texas Dental School, Rice University, and University of Houston. In addition, we had numerous medical students take one to two extra years—teach and do research with us, obtaining a master's/Ph.D. along with the M.D. Thanks for plentiful grant money from NIH.

And that's, I guess, when I started getting interested in what do we do with all this data that we accumulate. During these years I kept in touch with Dr. Stewart through Christmas mailings and I knew when he established the Registry of Experimental Cancers at the Cancer Institute [Attachment 1]. I tucked that away in the back of my mind and visited with him on the occasions of my visits here to Washington, or for meetings. And I saw him at national cancer meetings as well.

Then my husband and I moved to the Medical College of Georgia in 1971. I think you've seen that on the CV [Attachment 2]. We were there three years. I continued keeping the mouse colony. It was a little tight with getting funding, but we had a lot of the people there (including Drs. C. Bresnick, N. Sharewy) also using the animals for their particular interests in cancer.

Then we moved to Ohio in 1974 to help start a new medical school in northeastern Ohio. My former dean, Dr. Stanley Olson, who had been our Dean at Baylor all these years—I had known him actually in Chicago, 1952-54. Dr. Olson had become a consultant in Ohio because of his experience in medical education to determine if it would be feasible to establish a new medical school in northeast Ohio. Three cities wanted the new medical school. He convinced Youngstown, Akron, and Kent, all of which had universities, and the Ohio legislators to work together as a consortium. Dr. Olson knew, of course, about the mouse colony and had me visit several times in Ohio to see how we could set up to house the mouse colony. We finally did get it housed at Akron General Medical Center until a permanent location would be determined.

So I was in Akron for three years before we built the basic sciences building, which was in a town called Rootstown. NEOUCOM was established (Northeastern Ohio Universities College of Medicine)—a six-year program leading to B.S./M.D. degrees. The clinical courses would be taught in the hospitals. This consortium presented a different experience. I did a lot of things in addition to keeping the mouse colony, such as serving on committees for animal facilities, histology and electron microscopy laboratories, library and graduate programs. We tried to get grant money with other investigators at Kent State and Akron University. It was very difficult. And so I didn't know quite what I was going to do with keeping the mouse colony going.

Well, then, some things in my life, personal things, changed. I went through a divorce, and I knew I wanted to leave that area, so I looked into coming back home to my home. Got in touch with Dr. Stewart and the Cancer Institute worked out a fellowship for me with the Medical School in Ohio. I was here initially for four years (1982-86—the first of the later years). But that meant I had to do something with the mouse colony.

I arranged with my pathologist-friend, Dr. Masaki Ohmori, in Japan—I had sent eight strains of mice to him in Okayama in 1958, Kirschbaum Memorial Mouse Colony No. 2 (when we were at Baylor), and they're still at Okayama Medical School. Several doctors from Okayama and other institutions came to Baylor to do research in our lab. The program was funded by the China Medical Board, organized by the ABCC (Atom Bomb Casualty Commission) following the bombings in Japan. Dr. Noriaki Ida, our first doctor, translated Dr. Dunn's monographs on reticuler tissue neoplasmas (Attachments 3 and 4). I contacted Dr. Ohmori again and he was very eager to have the animals at Kagawa Medical School. I knew I would not be able to continue keeping them because the Cancer Institute, of course, had all their own strains of mice. We sent mice of all the strains. They had to transfer, I think it was four or five times, between Cleveland, Ohio, Hopkins Airport, and Kagawa Medical School, which is where Dr. Ohmori had moved to be Chief Pathologist. Kagawa is south of the Inland Sea, if you're familiar with the Inland Sea in Japan; this is on the southern island of Shikoku. So, that's where the mice went— Kirschbaum Memorial Mouse Colony No. 3.

But I still had this interest in the experimental pathology and the Registry types of things. The Registry of Experimental Cancers had been established on March 19, 1970. NEOUCOM allowed me to bring all of my pathological materials over here to the Cancer Institute. We were in Building 41 at the time, the little flat-top building next to the Library of Medicine. They gave me space so that I could go through and select the better examples from my materials to go into the Registry of Experimental Cancers. This was a major part of my job when I came here, and, of course, to continue working with Dr. Stewart and any other visiting pathologists on research and educational materials. We had a number of cancer investigators that came from Japan, the Netherlands, Italy, Germany, France, and other places. Any unusual lesions, we would always go over them together. So it was a real learning experience. Dr. Cornelia Hoch-Ligeti, retired, volunteered time at the Registry and published many papers on cancers in several organ systems. Our staff veterinary pathologist was Dr. Bernard Sass.

And the other thing that interested me in the Registry was that we developed teaching sets, for instance, microscopic slides and syllabus, on one organ system, let's say on liver or breast cancer in one or several species or representative cancers (and other lesions) in one species, e.g., Mastomys. That was of interest to me and I did quite a bit of work on that. We (the National Cancer Institute) sent them free of charge to anyone in the world interested in using these study sets. So that was part of my job also—preparing study sets, advertising so that people knew about what was available, and getting them sent and also getting them back. [Laughs] Sometimes there's a little bit of a problem when you send things out. The investigators really received those free of charge. The only cost to them was in mailing them back.

GC: Now, when you say teaching sets, do you mean slides?

AL: Yes, slides and an accompanying syllabus—twelve sets. And actually in addition to the slides, I selected lesions and made twelve sets of Kodachromes of each lesion. The reason I did that was because some of the tissues were very small, the lesions were very small, or there was only enough tissue to make a few good slides.

Then, let's see—continuing the Registry became difficult. Dr. Stewart, who was an Emeritus, came to the lab less often, and some administrative changes were made in the Cancer Institute. As AIDS came into the picture, more money went to AIDS. Since I had the fellowship only for four years, I could not be hired immediately. About a year and a quarter or so I stayed at the Registry as a volunteer researcher. Then Dr. Richard Adamson, who was the Director of Cancer Etiology, called me one day and said he had an expert position: that's how I got back on the payroll! [Laughs] I needed to work for a few more years! I remained as an Expert for five years (1987-92).

Meanwhile, I was over here in Gaithersburg in my condominium until I was able to get myself to the point where I thought I could retire and have a little more time with my family. Then I did not want to be away from the lab. So I stayed as a special volunteer (1992-96). It was very important to me. It had been my career all these years. And my children worked in the lab for me during the early years of my career.

GC: Oh, really?!

AL: Without pay for the most part. [Laughs]

GC: What would they do for you?

AL: Oh, different things. One of them that did some work in the Histology Lab in Ohio didn't like it. But in Houston my son—I taught my son Ralph how to do skin grafts on mice; he became a surgeon.

GC: Really!

AL: But an orthopedic surgeon, not a skin surgeon. [Laughs]

GC: But still, you taught him those skills.

AL: Yes, and one of his friends also became a surgeon. This was back in Houston where I used to do a lot of volunteer talks with the schools. I'd take some animals [to the schools] and show them how we took blood from the animals and gave them some mice to breed. We used wooden mouse boxes at that time. We didn't have enough money to buy the expensive metal or plastic ones. So we had wooden mouse boxes that we built and put on the roof of Baylor Medical School; the caretakers washed them by hand with brushes and we put them out to sun so they were "sterilized." My son decided he wanted to do the same thing, so he built boxes. We had a lot of mice in our garage and he understood enough about the genetics that he bred his own mice.

GC: Really!

AL: Some mice had a strain with a gene called piebald [Attachment 5], which was a certain kind of spotting. He mixed up the colors of the inbred strains and got some very unusual looking mice. He kept track of all that, took photographs, wrote some papers for his school class, and got his boy friends interested. So he turned a lot of people on with that too. Made a few dollars as well!

GC: That's amazing.

AL: Yes. It was a lot of fun.

GC: I bet.

AL: So, that's been my experience with the Cancer Institute early on and later on. Dr. Stewart was always a teacher and a big thinker. He was truly, as written in his tribute [after his recent death], a Renaissance man; always inquisitive and always wanted to share with his coworkers and his friends in pathology, particularly. All of us who worked there benefitted from this particular philosophy that he had. People will always remember his brown bag lunches [Attachment 6], during which we got together and just chatted—not always about cancer research but also what's happening, in politics at the NIH as well as political and cultural events in Washington, D.C., and the world.

We had visitors from all over the world—many of whom went through training with Dr. Stewart [Dr. Kash Mostofi (now at AFIP), Dr. Carel Hollander (Netherlands), Dr. H. Otsuka (Japan), Dr. A. O. Williams (Nigeria, now at FDA), Dr. R. Montali (now at Washington National Zoo), Dr. G. Krueger (Germany), Dr. M. Pollard (Notre Dame),

Dr. J. Harshbarger (Registry of Tumors in Lower Animals), Dr. G. Rudali (France), and Dr. H. Sobel (N.J.-V.A.). Those of us who worked there really benefitted from these experiences. I think that that's one of the very important benefits for people who work and study at NIH for a few years. I think it's benefitting from this type of contact and I know it certainly helped me to grow professionally as well as personally.

GC: Can you tell me a little bit more about working with Dr. Stewart: what the atmosphere of the laboratory was like at the time, how everyone interacted in the lab, kind of what the feeling was there.

AL: [In the early days] Well, of course, he was in the front office with a few secretaries. Mrs. Catherine Porter was *his* devoted secretary [Attachment 7]. He was very organized and focused on what he wanted to have done, and he had secretaries who would do what he asked. He was tough in a way. But on the other hand, if you were walking down the hall, he'd see you, call you by your first name, ask you how you are, how is your mother, how is your father. Very personable. Up right until the last few years he kept in touch with everybody and their families. So, this was very personal; it was like a family. In the later years we celebrated birthdays and holidays together, usually at O'Donnell's or the Navy Club.

In 1949-52 we were up on the second floor of building 8, each investigator and technicians having their own area [listed earlier]. One would be working on liver tumors, one would be working on cervical cancer, etc.; each pathologist had his own special organ system on cancer. And there were seminars and other discussions where these things were talked about with each other. Very relaxing situation. Yes. Very relaxing and very motivating for young people.

I remember particularly Dr. Thelma B. Dunn, who was one of Dr. Stewart's closest pathology associates. Just one of the most gentle, kindest and yet very, very smart ladies. Was a real teacher. You could go in and just sit with her and she would go over the slides and bring people out. That was the way I felt about her.

GC: You mean she would draw you out of yourself?

AL: Yes, yes. She could pull ideas and comments out; I was shy and not very smart at that time. I was a technician and doing rote things. But that was how I learned, sitting with people like that. And I think most of the other pathologists were that way also. I worked with several of them and I'd say they were all teachers, of a kind. I don't know, maybe that's how pathologists are in general, because you do often have to discuss these lesions and each person has a different analysis about the lesions.

We're talking mostly about light microscopy, the old fashioned slide that you look at in the compound microscope. Of course, often the special stains also aided in the diagnosis . . . but that was before electron microscopy was commonly used, or any of the immunological staining, and all that, of course, has developed since. One of Dr. Stewart's most requested reprints was "Histologic Typing of Liver Tumors of the Rat" published in *JNCI* 64(1), 1980 [Attachment 8].

I have very little background in anything molecular, other than what I had to learn when I was doing my teaching. But raising my family I did not do a post-doc or anything like that. So, I ran a little bit behind other people. [Laughs]

GC: It doesn't sound like that.

AL: But I'd say the atmosphere was probably one of the more congenial atmospheres at NIH. Of course, Dr. Stewart encouraged people to get their papers published. And most of us, certainly in my case, through knowing Dr. Stewart and his associates at the Armed Forces Institute of Pathology (AFIP) and the International Life Sciences Institute (ILSI), particularly Dr. T. Carl Jones (Harvard) [Attachment 9] and all other groups, I was invited to write chapters and participate in colloquia. I think that was just the way Dr. Stewart felt we could advance our thinking and working together. Dr. Hans Kaiser, University of Maryland Medical School in Baltimore, asked several of us as well as many others at NIH to submit chapters for his series of books on Neoplasia.

GC: So he would help you in getting, I guess it was his influence that helped you get asked to write chapters? Is that what you were saying?

AL: Yes. He would recommend people he knew because of their interests and expertise. And he had, of course, written *many*, many chapters. He was *the* expert in many types of rodent cancer, rats, mice, guinea pigs, mastomys, and other species, but mainly rodents. He's the pathologist everybody wanted to write the chapter or to help them. Even right up until the end, people, including Dr. Hans Kaiser, would have him review papers they were writing before they sent them in, or review lesions and help with the diagnoses. But he also referred me and others to review papers for journals. He continued to review papers for Dr. Benjamin Trump, editor of *Toxicologic Pathology*.

GC: I understand he went into the office, or into the lab, that as recently as two or three years ago he was still going in.

AL: Yes, he was. The only time he stayed home was when he had a doctor's appointment or his grandchildren were visiting or before that, of course, when his wife was ill. And then occasionally he would get a bad cold and he'd have to be home which really upset him. We thought probably the way his life would end would be to die at work—I mean, he was just there all the time. It got so his hours became fewer each day as the hearing, vision, and mobility worsened. To quote from his letter of resignation—"Finally at the age of 96 years and 8 months, I have decided to stop working." In January of 1937 he joined the original cancer (NCI) unit at Harvard (with Drs. Schereschewsky, Andervont, Shear, and Lorenz). They moved in 1939 to Building 6 (only six buildings on campus at that time).

Up to the end, when he got home from the Cancer Institute, he'd take his walk in his neighborhood and chat with his neighbors. It was the same thing, a personable thing. But he's very disciplined, a very disciplined individual. He usually liked to eat at the same time each day.

He was like a father to me, like a second father to me, in helping me when I went through some major decisions in my life. He had my children visit into the lab. [Laughs] You knew that Dr. Stewart died?

GC: Yes, May 30, 1998.

AL: Yes. We were on the e-mail with people about this. But it was so sad, the last few years, as he lost his hearing. And I think the worst thing was the eye problem. Of course, he would still try to use his monocular microscope. He had his old monocular with the one tube. I have a picture of it in there [Attachment 10]. Maybe you've seen that picture. One day he knocked the microscope off the counter top. It had been made in Germany. It was the original Zeiss Company. I'll have to think of the name of it—Jena. It's in East Germany. Dr. Bernard Sass was still alive at that time. Between Dr. Sass and me and a couple of other people, we tried to get his microscope repaired; it could not be repaired. So that was the end of the monocular microscope.

GC: It was just too old?

AL: Well, they don't have the parts any more, even in Jena, and it was really bent up. It was sad. But as the eyesight went, he was using magnifying lenses. Just to read or to get your phone number, he'd have to do this, or eventually ask somebody to dial for him. That was sad. We knew that was really ripping him apart, that he wasn't on top of it, because he had always been in control.

GC: That probably made him a good Lab Chief.

AL: A good Lab Chief. Outstanding Lab Chief. As I mentioned earlier, he was tough, but anybody who was a turncoat was off his list. That's it.

GC: What counted as a turncoat?

AL: Well, you know, if people talked behind a back or were unfair or not doing their job, just not doing their job properly. He did not like that. They got crossed off his "good" list. On the other hand, with everybody else he would do anything in the world for people. He really would. And he did for a lot of us. He really helped so many of us move ahead. He was wonderful, outstanding. Don't meet people like that very often.

GC: You really don't.

AL: Yes. I mean, even at the time of his death, I got an e-mail from a gal, Betty Johnson, that was my roommate for a couple of years. She was a technician for Dr. Ed Murphy. (Also, Betty and Dr. Bill Ober did the First Microscopic Telecast, April 7, 1949 [Attachment 11].) She married one of the pathologists in the department (W. Halsey Eyestone). They had moved to Missouri; she e-mailed me that one of the veterinary pathologists (Joe Held) had called them. Then I was trying to get her, because I had been called by another man, a Dr. Peter Mora, I think his name was. Have you heard that name? I don't think I ever met him. I believe he is retired. I had been up at my college for my fiftieth college reunion. I got back Sunday night late, because I had a handbell festival at church. I returned his call on Monday (left message, I believe).

Tuesday morning Dr. Mora called me and wanted me to tell him more about Dr. Stewart's death. And I said, "I am really embarrassed. I didn't know he had died." I didn't get the *Washington Post* at that time. I got the *Times* only, and they did not have the obituary. He read me part of the article. The article was Monday and the obituary was Tuesday. I have copies of them both here for you, if you'd like to review them [Attachment 12].

Dr. Mora got my name through the NIH Alumni Association (NIHAA). I pay my dues, I go to an occasional meeting. The Alumni Office said, "Well, you have to call Annabel Liebelt, because she used to take Dr. Stewart to meetings." Really not so many. I mean, there were a couple times maybe I sat with him at the luncheon or went to meetings with him somewhere. It wasn't that much, because usually his daughter and son-in-law took him.

GC: Is that Janet?

AL: Janet, yes, and her husband, Mike Rowan. Anyway, that's how Dr. Mora got my name. Then I called my neighbor very quickly to give me the articles, so I had them. So that was the article in the *Post* [shows Case newspaper article] and then on Tuesday, you have that?

GC: Right. I have those.

AL: Yes, okay. Then this was the tribute that they have now sent to everybody on his mailing list.

GC: How nice.

AL: Actually, you can have this. I think I have an extra copy of that, in fact. You have this one, you said.

GC: Right.

AL: Okay.

GC: That would be wonderful.

AL: Yes. And I would agree with the tribute *totally*. I think they really caught the essence of who this man was. You know, he was an amazing individual. He often talked about his father, who came from Scotland. Dr. Stewart, Janet, and Mike went to the northeastern coast a few years ago. I don't remember the name of the town, whether it was in Nova Scotia or where, and then ended up in Houtzdale, Pennsylvania, where, of course, he grew up. Rode horseback, worked in the mines, chewed tobacco at five. You don't need to say that. But he was quite proud of all his early bad habits. [Laughs] Talked about them all the time.

He talked about how his father used to read the Bible to him all the time. If you mentioned something from the Bible, something from Shakespeare, Gilbert and Sullivan, some poet—Bobby [Robert] Burns, for instance, in the tribute—all of a sudden he was reciting. Just like it's coming out of your machine [motions to tape recorder]. He could recite things spontaneously. One day he mentioned a poet "of old, Col. John Hay." I pulled an old (1903) paper book I had titled *Taylor's Popular Recitations*. I took it in for him to peruse. I mentioned "Jim Bludso"—he immediately started reciting this poem. He thanked me with a note. It always amazed me—people like that, or people who memorize long things they play on the piano. It was in his head. And yet he always said, "Don't ask me to correct the spelling, because I'm a lousy speller." [Laughs] "Annabel, here, you take care of the spelling." [Laughs] He had a wonderful memory, one *outstanding* memory. That's another thing that made him so interesting, because hardly anybody else can do that type of thing, you know. [Laughs] And his continued curiosity and intellectual interests were shared with us. For example, his loyalty to Jefferson Medical College and interest in Samuel Gross and in J. C. Da Costa's poetry [Attachment 13].

I guess it's that discipline that I think made him such a good pathologist, too. He could look for the important things on the pathology slide and the important things about the Cancer Institute. If he had something bad to say, he'd say it. He wouldn't say it behind anybody's back. He'd say it right to the face.

GC: Oh, really?

AL: Yes. He never hid it, he never hid it. No. And that sometimes created a little bit of a problem, as you can imagine.

GC: I can imagine.

AL: Yes. He would never be behind anybody's back, ever. No. Yes, that was another thing I liked about him, because I like people to be open. I tend to be too open sometimes, but I just can't carry things and not share. That's just how I am and I think that's how he was.

GC: So you always knew where you stood with him?

AL: Always knew where you stood with him. Yes. Absolutely. Yes. And, you know, he always shared his family. We would always go out for somebody's lunch, go over to O'Donnell's, one of his favorite eating places, and over at the Club, the Navy Club, and of course he knew everybody everywhere. He would talk to the maître d' or the waitress and ask how their families were. He was just into wanting to know everybody and how their lives were going. Yes.

And I remember when he had his eighty-fifth birthday party, and then Elisa Chavez, the technician, and I did the ninetieth birthday. We had it at Building 41. We had a big party—lots of his colleagues and friends from local and distant places. We picked up all the food at the Giant [grocery store], and I had somebody with a camcorder there, pictures and so forth, and we had a picture of him when he was to cut the cake—his hand or elbow went into the cake. (Janet has all the photos, cards, letters, attendees, etc.) The next day Elisa and I each received a huge bouquet of flowers from him. That's how he was.

GC: Ohhh. Wow.

AL: Thanking us for doing that for him. And we didn't need any thanks, because we wanted to do it. But, you know, we contacted people all over and we had many people that came from elsewhere, or if they couldn't come, if it was too far, they would send cards or other things. He was always grateful. Never missed a trick. And even though *he* had everything very private, that's the way he wanted it . . .

GC: You mean in terms of the funeral and everything?

AL: His own, yes. In the fall, Dr. and Mrs. Banfield, Dr. M. Ohmori, and I went to Arlington Cemetery to pay respects at the crypt in the columnarium. However, he never missed an opportunity to do what other people wanted, that is, attend memorial services or funerals and so forth, even though it wasn't his choice. He would always do what he felt those people would have wanted, which I think is an admirable quality as well. I think a lot of people don't do that.

GC: It sounds like he touched an amazing number of people.

AL: He did! Yes. I wouldn't want to see how many of these letters Janet sent out, but I can assure you it was a long list, because he kept in touch at Christmas with many friends and associates. The last couple of years Janet sent out ones with his name inscribed on the card, and it was nothing personal. But up until then, he had written his own name on the Christmas card.

GC: Wow.

AL: [Laughs]

GC: That's really amazing.

AL: Yes, it is! Yes.

GC: How did he work with Dr. Dunn? I know they worked very closely together and respected each other.

AL: Yes. Well, I guess one of the reasons I worked with her was because of my interest in the endocrine tissues and breast cancer. Preceding me: Mary Louise Kunde [Attachments 14 and 19] and Nancy Geiss (Falls). Those two areas were, well, in addition to the lymphomas, of course, the interests in basic research in experimental cancer. That was probably why I went in to visit with her on occasion, because of her expertise, and she had some techniques that she had her technicians develop with respect to studying the breast tissue in mice. That was one reason I went in, too, was to learn the techniques.

One sad thing: Many of her slides were still there (in 1996) when I left and we had all of her cards which were coded in her own way. I think that probably those things are going to be thrown out. Very unfortunate. But there's nobody left to look at these things now. I don't know. The materials are up in Frederick with all the other Registry materials that are up in Frederick now. I'm not aware of what Dr. Jerrold Ward is doing with them. Dr. Umberto Saffiotti became the Lab Chief after Dr. Bernard Sass became ill and died. So Dr. Saffiotti became in charge of the Registry, and, of course, he's retired now (1998).

And Dr. Jerrold Ward is aware. I don't know whether he's done anything with them or not, but anyway that's where they are. It's been my interest to do something with them, but I've kind of run into a brick wall with that. My Japanese friend was here in August (1997) and in September (1998). He is very interested in having the Registry materials. But with this crisis with the Japan market, I don't know if they would be able to arrange this. When I left my special volunteer job, Dr. Saffiotti and I discussed the materials that I still had there—because I hadn't had a chance to go over them all—and then all the study sets that I had made with the sections but hadn't put into sets themselves and written them up. We discussed the possibility of sending all those things to Japan. Soon I hope to contact Dr. Ward.

GC: Really!

AL: I sent all of my remaining materials to Japan via the Nippon Express boat line. I had to go back to Building 41 after I left my special volunteer [position], and the people in Building 41 were very helpful in helping me pack up everything. Actually, where did I go? I was going on a trip and the Nippon Express didn't come when they were supposed to. They were delayed. So they came after I had left to travel. [Laughs] The administrative people in Building 41 took care of everything for me. The materials were sent over there and Dr. Ohmori said they had a difficult time receiving them.

GC: In terms of customs, or whatever?

AL: Customs, taxes, and the money and all that. So they were sitting around in a couple of different places, I think in Kobe, and some place else, before they ever got to Kagawa. But they're in Kagawa Medical School now. And I had gone over there—maybe you saw on my CV—I had gone over to Japan.

GC: Yes, I did see that.

AL: Yes.

GC: I need to stop the tape. It has run out.

AL: Yes.

[End Side A, Tape 1]

[Begin Side B, Tape 1]

GC: Okay. So, you had gone over to Japan.

AL: Yes. I went over, and again this was through friends of Dr. Stewart and doctors I met in his Department when I was back here working as an expert (especially Dr. H. Otsuka from Tokushima Medical School). So, I prepared several lectures on the research and consulted and looked at slides that they had questions on with respect to some of the liver tumors in the study sets. They wanted Dr. Stewart's opinion, and I took a study set and worked with them on that.

While I was in Japan I saw mouse colonies No. 2 in Okayama, Japan, and No. 3 in Kagawa. The Japanese are such fun people. They had my picture up above the doorway into the mouse colony. [Laughs] They're so grateful for everything that you do.

Anyway, what happened was, Dr. Ohmori said, oh, they could take all the materials that I had left, which I called the Kirschbaum materials, named after Dr. Kirschbaum, my teacher in Houston. I kept his name associated with the colony. They had space and they had the money. That was a few years ago. [Laughs] So, they're there now. Then I gave them a lot of my personal books that related to cancer research, because most of the Japanese read English, speak English now, as well. And they're there. I don't know if anybody's done much with them, because Dr. Ohmori is going to be retiring in another few years (Y2K actually) and that's why he said he would be able to take over that Registry. But we just don't know what's going to happen. I initiated with Dr. Saffiotti and I have not heard back from him as yet. I think he was busy taking care of his own retirement materials. [Laughs]

GC: Right, right.

AL: Yes. I still have a whole garage full of things to write up. (Hopefully I will get into these boxes and pull more "early days things" for you.) That's the reason I bought my computer, was so I would write all this up. It's actually what I'm talking to you about, you know, the opportunities that people have when they work with someone like Dr. Stewart.

And, I don't know, you're too young to maybe realize this yet, but it seems like today often the case is that a person doesn't stay in one place for very many years. A better opportunity comes up and you have to seize the opportunity. *Carpe diem*, as they say. But, you know, most of us either stuck with the same thing or stayed in the same place. Many of those people that were technicians at the National Cancer Institute were there for their whole careers, many of them, or moved up or got more degrees and just stayed there and continued to do research there. So, it's really a very educational-oriented type of environment. It's, you know, somewhat typically government. You have to overlook a few things, like with other government agencies. [Laughs]

GC: How so?

AL: You know, in contrast, let's say, to a pharmaceutical company where everything is a dollar bill. We had people who have left the government or academia even and gone with pharmaceutical companies because it's more money, but it's also a lot more pressure. It's a different type of work environment.

GC: More product-oriented, maybe?

AL: Yes. That's true. More product-oriented. And, I mean, I'm not against that, of course, because here we have all these new drugs coming out now that are making our lives much more comfortable, and that's what it's all about. Yes. Dr. Sabine Rehm, an outstanding veterinary pathologist, was at NCI in Frederick with Dr. Ward. They and we did studies and papers together. She did not always agree with Dr. Stewart but we "listened" to all opinions. Dr. Rehm is now with Smith, Kline, Beecham in King of Prussia, PA.

GC: You were at the NCI very early on in the whole time of the NCI. Can you tell me physically what the campus looked like? As compared to today? [Attachment 14]

AL: Oh. Ohhhh.

GC: Can you tell me about some of the changes that you've seen?

AL: My goodness. Oh, certainly. When we'd go out at lunch time, we'd sit outside and eat and then go for a walk over all the hills and sit under the beautiful trees. There was only, I guess, one dining room at the time, in Building 1. Where was that, on the second floor? I think that was it. But a lot of us never went to the dining room. We just ate outside.

GC: You would just bring a lunch or something?

AL: Bring lunches. Oh, and another thing, when I was there, we had a group called the Hamsters. We danced and sang.

GC: Oh, really!

AL: There's a picture in that *NIH News*. I meant to pull that out for you. That was put in again early in the 1980s. As I was starting to tell you, they've pulled out all those early . . . *Record*, that's what it was called, the *NIH Record*. They've pulled out pictures and put them in again and asked people to identify.

In fact, I have some black and white photographs in there that I saw when I was filing. I still have my piles of things from my move, as you see. [Laughs] Baby pictures of the grandchildren, recent pictures of the grandchildren, my parents. [Laughs] I don't know if I'll ever get to that. But I saw one of those pictures of the Hamsters [Attachment 15]. I remember we did the Charleston one time. We had our little short skirts and our long pearls hanging down and did the Charleston.

GC: Oh, how great!

AL: Yes. We had a *great* time! I guess I was in that three years. I missed that when I left. It was a ham operation, really hammy. I think they have something now where they have plays and things, but of course I haven't kept up with any of that since I left. But when I saw that picture come out again, I just about died howling. [Laughs] I sent copies to my children and I said, "Can you find me?" And to my friends.

GC: Did they?

AL: Yes, they all found me. [Laughs] But that was a fun part. Well, another thing we used to do . . . before they built up Bethesda, of course, the corner of Georgetown and East-West Highway was just a few little stores. There was a People's drug store and a little dress store and a few places like that. But then the corner where the Ramada Inn is now . . .

GC: Up at Woodmont, or I guess it's one up from Woodmont?

AL: No, it's not Woodmont. Woodmont is the one where you have to make the right off of Wisconsin. That's Woodmont. Battery Lane it is.

GC: Right. So, the Ramada Inn is the next one.

AL: Yes, the next one, where the Ramada Inn is. In back of that, there were a few old houses, and one had a tennis court. Mr. Keppe lived there, K-e-p-p-e, and one of my friends (Flo Leuthardt) who worked in Building 6 knew Mr. Keppe [Attachment 16]. So we had our own tennis group that came over from Building 6 and Building 8. A whole bunch of us used to go over there after work and play tennis for hours, and then we would all go have pizza and beer (and play bridge). We did this night after night after night after night. We had a *good* time.

GC: It sounds like it.

AL: Yes. But the campus only consisted of, let's see, Building 1, Building 2 and 4, 6 (cancer), and 8, 3, 5, and 7 were back there. That was before the Clinical Center was built, because that was before 1954 when . . . I left in 1952, I was there from 1949 to 1952, and I think it was built right after that. I found photos of Betty Johnson, Hal Eyestone, and I gardening [Attachment 17]. I sent an e-mail to Betty—response [Attachment 18]—the garden was originally a victory garden during the war and was located adjacent to Building T-6 just south of Cedar Lane. Probably lasted until about 1955.

GC: Right. It opened in 1953.

AL: 1953. Because when I came back to visit Dr. Stewart, he was in there one time. He was in that building. But another thing we had, in addition to those eight buildings we had T6, which was over here, which is where the photography was, and where we took all of the histology slides to be processed. There were some very famous people who worked in that building. Betty also mentioned Top Cottage, which was torn down to make way for the Clinical Center.

GC: Really!?

AL: What was his name? Kessler, Mr. H. Kessler, I think. Was he the photographer? But back in the early Records, I don't remember all those names of those people, but I think he was German. Mr. Allbrecht was the head of the Histology Lab. Mr. Kessler—histology. (Dr. McCardle, in Building 8, also involved. In his lab, Whitey Wodinsky and Frank?)

GC: And he was an . . .

AL: *Excellent* . .

GC: photographer?

AL: The people that ran those facilities were all very highly technically trained. And we had the best of everything.

GC: Really?

AL: Yes. And, of course, there were animals, too. We had the animals right in our own building, in Building 8. Johnny Murphy and Neil Deese were the careful caretakers. Then we did some things with people in Building 6, but I was never located over there. A lot of the cancer people were there, because that was *the* cancer building. We were just kind of the leftover building, Building 8. Drs. Harold Morris and Celia Dubnik were in Building 6—Dr. Morris originated the famous lines of rat hepatomas. His last position was at Howard University where he took his pathological materials. After his death Dr. Sass and I attempted to get his materials for the Registry—we failed.

GC: [Laughs]

AL: And, let's see, but see, and then that stone house that's up on the hill, there used to be seminars there periodically. We were all free to go to anything we wanted to.

GC: What kind of seminars?

AL: On the research people were doing in the Cancer Institute, or probably other Institutes. For instance, Dr. Katherine Sanford (Dr. Wilton Earle)—tissue culture and Dr. Ruth Merwin (Dr. Glenn Algire)—chamber technique. I don't know what all went on there. One of my friends who worked in our building for a short time and then she went to Nutrition, I told her about you, and she said, "Well, be sure you mention Top Cottage."

GC: Okay.

AL: To be honest, I don't remember much about Top Cottage. So she said to be sure and mention there was a Top Cottage. She used to go to things there, I think. She was a couple years ahead of me.

GC: What is her name?

AL: Mary Lou Kunde [Attachment 19]. She was with Dr. Dunn for a short time and then she went to Nutrition. Two people I knew in the Cancer Institute, one that worked with Dr. Hogeboon. Do you remember that name?

GC: I've heard that name.

AL: Hogeboon, yes. She was one of my best girlfriends. Her name was Mary Jo Striebick [Attachment 16]. She worked with Dr. Hogeboon and she, unfortunately, died many years ago of terrible breast cancer. But she, and Flo Leuthardt, L-e-u-t-h-a-r-d-t, I think, and she worked for the biochemists, two biochemists, one who became Director of the Cancer Institute, Dr. Carl Baker, and Dr. Bob Greenfield; they worked in Jesse Greenstein's division.

GC: Oh, Carl Baker?

AL: Yes, Carl Baker, who became NCI director, and Bob Greenfield were down at the Warwick Clinic.

GC: Oh, Dr. Endicott, maybe?

AL: No, it wasn't Dr. Kenneth Endicott. I knew Dr. Endicott later on. No, no.

GC: Rauscher?

AL: No, it wasn't Frank Rauscher.

GC: Heller?

AL: No, it wasn't Rod Heller. I mean, I had met all those people through Dr. Stewart, but I didn't know them well. Ahh, now, what was his name? A really nice-looking man, very nice.

GC: Okay. I'm trying to think who that might have been.

AL: And he was a biochemist. But anyway, Flo worked with them in the Biochemistry Lab. Let's see, oh, and then there was Betty Johnson was the one that worked for Dr. Ed Murphy, who subsequently worked on the cervical cancer. He had a technique of taking a wire and putting the carcinogen on the end of the wire and then inserting it and trying to create the cancer on the cervix of a mouse. He subsequently went to Bar Harbor and he was there for many years. He has since died. Betty Johnson worked for him and so she had been sent away to learn how to read Pap smears [Attachment 11].

She's the one who then became my roommate, Betty Johnson. She married Hal Eyestone who was both the veterinary and clinical pathologist. Then he went out to the University of Missouri, I think to the Vet School, in Columbia, and they've been there ever since. I was an attendant at their wedding—in fact, Betty told me that I gave a shower for them in Top Cottage.

GC: How nice.

AL: The wedding was in Detroit Lakes, Minnesota [Attachment 20]. But one of her friends, Belle Fast, worked in the Cancer Institute. I can't tell you who she worked for—she was from St. Choix, Wisconsin—but she was also kind of in our group. Let's see. But the one Dr. Stewart always talked about was his secretary, Mrs. Catherine V. Porter. She, I think, got Parkinson's and has died. But Mrs. Porter, she just did everything for Dr. Stewart. He just thought the world of her. Mrs. Porter was up on a pedestal. [Laughs] Shower for Pat attended by secretaries and technicians shown and identified in photographs [Attachment 21].

GC: How long did she work for him?

AL: I think for a long time. Yes. I don't have any paperwork on her at all. I do have paperwork on all these people that were in that group, and a lot of his people. Before I left, Dr. Stewart had me go through and label all these photographs that were sitting around in a closet somewhere. So I had them all photographed, and when they worked in the lab with him. His whole lab.

GC: Wow.

AL: And I made copies for myself of these. They're in a box in my garage somewhere. If you're really interested . . . now, I think he, well, his wishes were that all those be put into, not to the National Library of Medicine, I don't think. What was the lady's name? [Long pause] In the Clinical Center, it's like the Museum.

GC: Oh, the Stetten Museum?

AL: They may have gone to the Stetten Museum. What's the lady's name that did a lot of that?

GC: Victoria Harden?

AL: Victoria Harden. All those things were supposed to go to her.

GC: Okay, okay.

AL: And so you might want to check that out first and see what she has. I do think all that went to her. Now, where she put it, I don't know.

GC: Okay. I know her very well, so I'll ask her.

AL: Okay, good. That will be a good place to find, and he has group pictures of the people in the lab, too. Most people have been identified.

GC: Oh, great!

AL: Of a lot of the people that were in Building 8 and then a lot of them, of course, were in the Clinical Center after that.

GC: Right.

AL: You would have to do some digging to figure all that out.

GC: So you were in Building 8 for most of the time?

AL: Except when we were down at the Warwick Clinic.

GC: Where was that? Do you remember the address? Was it in D.C.?

AL: Yes. It was right near the New York Avenue Presbyterian Church and right near what used to be the old Doctors' Hospital. They had the surgeon—what was his name, this Public Health Surgeon, or Chief, whatever his title was—he was in the same building with us. (Also, across the street was a paint store. I went on my lunch hours and learned Pennsylvania-Dutch painting—which I did on any blank object I could find!)

GC: Was that Parran?

AL: No, this was, no. Gosh!! You know, I'm sure I've got some of this stuff somewhere, because I saved a lot of those history things when they came out in publications. I have them in a file somewhere. How soon are you going to be getting all this together?

GC: There's no deadline right now. I'm just collecting right now. So, no rush.

AL: I'll see if I can dig up some things for you.

GC: I would be very interested. Yes.

AL: Those things are written down somewhere.

GC: Okay. Good.

AL: But the campus was beautiful. And then all of a sudden all the other buildings went up. [Laughs]

GC: Right.

AL: And the buses started, and all those things started. Oh, my goodness. I couldn't believe it when I came back here.

GC: I bet.

AL: Yes. It was quite different. In fact, when I came back here . . . meanwhile, Dr. Stewart's group had been at the Eye Clinic and that was, I think, right across from where Suburban Hospital is, and they were in Del Ray building, and then they went to the Landow Building on Woodmont.

So that's where I was when I came back here in 1982. We were then negotiating to go over to the Uniformed Services Medical School, to the Pathology Department. They were going to take the Registry and remodel the garage, part of the garage, for the Registry. That fell through. That was a political thing, I think. So, we stayed at the Landow Building all that time, and it was . . . so, we parked over behind Building 41 and I got my walk in every morning and afternoon. Then they started running the buses, so we were able to get bus service back and forth. That was very nice. It was a nice walk along the wooded path back there, through the park and so forth—tennis courts.

GC: Did you notice a change in the general atmosphere at the NCI, too? I mean, you've talked about changes to the campus. What about changes in the research atmosphere? It was much bigger, obviously, when you came back.

AL: Oh, yes. Well, it grew. They had big labs. Of course, I guess one thing that I saw was a growth in the bureaucracy—the middle people—and that's true all over the world, I think. That wasn't just NIH or the government. I saw it in medical schools and all over. More administrative things, more paperwork. So you lost that intimacy, the flavor of intimacy.

I mean, I remember even back at Baylor, when we went there in 1954, when I wanted a technician, I would just call up, what was his name, Johnny "Something or Other," and I would say, you know, we have some money and we need a technician. He would say, "Well, there's a young lady over at M. D. Anderson that's looking for a new job. I'll call her up." And the next day I had a technician! I mean, that's how simple it was! You didn't have to sit down and write a job description. So, at Baylor we had that intimacy of knowing everybody and how you get things done as friends, colleagues: You talked to each other.

And I guess I started to go to these national meetings and I saw a lot of the squabbling over whose virus was doing what. But then the thing that really bothered me was when I went to Georgia, the paperwork I had to go through just to get some pencils, you know. That was the Medical College (speaking as a city D.C. gal). There wasn't much in Augusta, except the Augusta National Golf, the Medical College, and Fort Gordon, which was not the most popular Fort for people in the military. Many didn't like Fort Gordon. It was off the beaten path. But a lot of the retirees from Fort Gordon came to put their feet on the desk in their last work job, so to speak, and things didn't get processed. That really bothered me.

But then I saw all these things I had the opportunity to participate in with building the new medical school in Ohio. We used the resources that were there, including the Cleveland Health Science Libraries in Cleveland, that had to do with Case Western Reserve, and all that. We used those people to help us build. But as the thing grew, the bureaucracy grew and it's just become very difficult, you know. Faculty have to do a lot of things. They have to contribute service and teach and do research, and a lot of that.

I mean, I ran into a problem myself there. I'll be honest. I worked full-time when I went to Ohio. I had not been working full-time all those years while I raised my family. I was like 70 or 80 percent or whatever it worked out in [hours]. That was another thing: I could work my schedule out each September, depending on my carpools. [Laughs] And I was very fortunate. I had my mother with me for seventeen years, and that made it a lot easier for me to do all these things.

Now with the computers, it's become another whole world, too. We all talk to each other either on the computer or by leaving messages on the telephone [Laughs], and we're not very intimate any more. Really! So, we've lost a lot of that we used to have. It bothers me a little bit. I see my own children caught in the midst of that. It's kind of the same as with the change in the family, and that intimacy is disappearing as well. But, that's the way the world is going. You can't do much about it. You can't change it. You have to make the best of it. So, I try to see everything as positive as I can. [Laughs]

GC: Back when the campus was very small, it sounds like it was easy to socialize and make friends among the young technicians?

AL: Yes, yes. It was. Yes. We had our little groups that did things together and, of course, there were a lot of the young people, like Betty Johnson and Belle Fast, they rented rooms in private houses right near campus. Yes. Now, I lived at home for a while. My family still had the home here on Piney Branch Road near Walter Reed, so then when Betty and I decided to room together, we all moved into a new apartment building on Connecticut Avenue. We had our own little place there and we were in carpools. I didn't even know how to drive then, much less own a car. But then the experiments went on over the weekend, too, so I had to take the bus out to NIH to do whatever had to be done.

GC: Was that a long bus ride at that time?

AL: Oh, yes. Well, if I had to come from my home, which was near Walter Reed, I had to take buses and transfer. Occasionally one of my mother's friends would drive me out there [Attachment 14]. They had a hard time seeing the autopsy rats, but . . . [Laughs] . . . Then I made tea for them.

GC: [Laughs]

AL: I'd say, you don't have to stay here, you know. You could get out and sit someplace else! [Laughs] I had one interesting thing that happened. One Friday afternoon, now this was, well, this was when I worked, I think it was the first year I was there, and I worked for this little Greek doctor named Dr. Alexander Symeonides. You may have heard of him. He was about half my size. He was from Athens and his wife was an opera singer, Nicholaedis (?). He was my first boss, actually. And I tube-fed rats and mice. In fact, a famous *Life* photographer took pictures of me doing this.

Late one Friday afternoon, one of the rats bit me. I wore rubber gloves, but these rats, some of them had been hypophysectomized and had lost weight, were scraggly and awful and didn't look very good. Then I got kind of worried, after the rat bit me. The secretary told me to call the Health Unit. "Have you had a tetanus shot lately?" And I said, "No." They said, "Well, you're going to have to get them. So, we'll call over at Walter Reed." And so I went home (I was living at home then). I walked over to Walter Reed that afternoon and then Saturday and Sunday I got my tetanus shots.

GC: Ohhhh.

AL: [Laughs]

GC: Those hurt.

AL: I remember that. That was the only casualty I remember having.

GC: Did they hurt as much then as they do now?

AL: Oh, yes. Sure, it hurts. All shots hurt. [Laughter] Even the one when I get my teeth worked on. Let's see. I was trying to think what else. But the Warwick Clinic, that was an interesting experience down there. I'll tell you who else was down there. That was when we had the two doctors, one from Switzerland. That was Prosper Loustalot,

L-o-u-s-t-a-l-o-t. There are pictures of all these people in that group of pictures [Attachment 16]. He was working on breast cancer, among other interests. Well, he came down to the Warwick Clinic with us. And the little doctor from Peru, ahhhh, let's see. I have to think of his name. Mori-Chavez, M-o-r-i hyphen Chavez, Pablo. Mori-Chavez. He called me "Anita" and wanted me to come to Lima to work. He had his wife and his mother, no children.

GC: You have a great memory.

AL: I liked all these people. They were all so interesting. They were down there. And then another doctor who was down there in our section—see the biochemists were down one hall and we were down another hall—was Joseph Leighton, L-e-i-g-h-t-o-n. He was the tissue culture expert. He developed some new methods in tissue culture. He's out in California now.

GC: Is he?

AL: Yes. See, all these names would be on Dr. Stewart's Rolodex somewhere. I should have made some copies of those. I don't think I have any of those names. But, I'm wondering where they would be.

GC: I might be able to track them down through the Alumni Association.

AL: You maybe, yes, you can do that. Right. But he's in California. Okay. Who else went down there with us?

GC: How big was that group, the Warwick Clinic?

AL: Wasn't very big. There was just something of the ones I mentioned. There may have been one or two others. Then there were a few from biochemistry.

GC: And were you down there for a year, or a few months?

AL: Well, I can't remember exactly whether it was one or two years, because I was only, you know, that period of my duty there was only three years total. So, I don't remember exactly.

GC: Did you find that your experience, or did you feel that your experience was different at the NCI because you were a woman? Or did you feel that most women had different experiences from the men there?

AL: To be honest, I don't think I ever thought about it. I knew I was a technician and at that time I didn't have any ideas of where I was going or anything. We had some men technicians as well. There was a man who worked for Dr. Dunn, a young man. I'm trying to think of his name.

Oh, I'll tell you who else was at Building 8. The two men that took care of the animals. Johnny Murphy—these people are dead, too—the tall one, Deese, I think that was his last name. Those two men took care of the animals and they were in our building. Of course, Dr. Stewart treated everybody the same. They were all very highly respected as well. In Building 8 also now, I think I can remember the names of all these people, and you'll find those pictures on the basement or the first floor, I can't remember. [Walter E.] Walt Heston was there. He was the geneticist. He just died a few years ago.

GC: Oh, really.

AL: Not too long ago.

GC: I've heard his name quite a bit.

AL: Walt Heston. And the immunologist, Dick Malmgren; he lives in Annapolis now. Howard Andervont, of course, "Andy." I do have pictures of all of us somewhere. [Laughs] But up on the same floor as all of us, we had, I said, Hal Eyestone, Charles Congdon, and I did some work with him. He did a lot of work with radiation and with

Dr. Egon Lorenz in Building 6, Charles Congdon. He had several different interests. He was a nice man. Let's see. Ohh. Then the Finnish doctor I worked for, he was interested in stomach cancer. His name was Erkki, E-r-k-k-i, Saxen, S-a-x-e-n. He may still be alive. And Dr. Ambus Mulay, he was an Indian, M-u-l-a-y.

GC: A very international group.

AL: It was! It was very international, yes. And Dr. Oscar Duque, D-u-q-u-e. He was from South America. I'm trying to think, was it Bolivia, or, I can't remember right now. Actually, he married one of the female technicians (Eleanor) [Attachment 21]. She's dead and I'm not sure about him.

GC: Was that pretty common, for people to meet at the Institute and marry?

AL: I don't know how common it was. People dated, but, well, I've already told you two examples, because Betty and Hal got married! [Laughs].

GC: Were they in the Commissioned Corps?

AL: Yes, I think so. Oh, yes, there's one other Indian man with a long name—Wavredecker. He lives right up the road here in the town with a funny name—Ijamsville. There's a French restaurant up there. A lot of these people came to the ninetieth birthday party [for Stewart] that we had, too.

GC: That must have been amazing.

AL: It was.

GC: The number of people you probably had there.

AL: Yes. Oh, gosh. [Pause. Seems to be trying to recall] I'll have to think of his name. It's a long Indian name. You'll find it when you go through all these other things.

GC: Right. Right.

AL: And if I think of any of these other things, I'll try to write them down for you.

GC: Okay, okay. You've answered so many of my questions. When you came—I'm very interested in the early years, and I'm just interested—when you came in to work, what was the typical day like for you? What time would you get to work? What would you walk in and do?

AL: Yes, yes. 8:30 to 5:00. Yes. And some of that time, as I say, I was carpooling, when I lived on Connecticut Avenue. Actually, I rode with somebody when I lived with my parents (Piney Branch Road). But I was always there on time and I'd get right to my tissues and take care of my tissues for processing. Usually the bosses would be there and the technicians. We all had pretty good hours then. And we all had a lunch hour. It wasn't prolonged. It was a regular lunch hour time. I don't even remember breaks, to be honest. We probably did have coffee and things, but I don't remember there being anything precise. But we weren't on the telephone all day either. I mean, a lot of jobs today, people are on the phone lots. No. We didn't do that. It was casual. You walked to the other buildings to take care of your job duties. And I just, I kind of hated to leave work. I've always had so much fun there. [Laughs] But we didn't usually stay late either, unless there was a seminar or something like that. And I do remember the great snowstorm—year 1950-51? Betty and I were driven home by Dr. Eyestone—it took many hours from NIH to our apartment near Chevy Chase Circle.

GC: But you said sometimes experiments ran over a weekend.

AL: Yes, yes. Well, if you were painting mice seven times a week, you had to be there seven days a week. And I found the same thing true when I went to Illinois. I had to go in over there, if I was doing things like that.

GC: Just to keep everything going.

AL: Just to have to keep everything running.

[End Side B, Tape 1]

[Begin Side A, Tape 2]

GC: This is the second tape with Dr. Liebelt on June 17, 1998. Okay. We're going.

AL: [Laughs] You have such a sweet voice.

GC: Thank you. I got a red flash and I got worried for a minute that it was not recording. Okay. I think we're okay.

AL: Well, we gals did meet guys and we dated people who were in different buildings. That was kind of nice.

GC: I guess so.

AL: [Laughter] I don't remember anything serious, but we had our eyes open and we had these people come in from other parts of the world. It was a growing experience [Laughter] because, of course, in many cases they were much older than we were, too. We were very naive little chickens, just out of college. Ah, let's see. Another nice thing, I think, people like, for instance this Dr. Congdon, he had a large family and on occasions they would ask us to their homes for picnics and things like that. It was, again, more of this knowing people better. We were just a big family there.

GC: Did you feel, or did you notice, was there a pretty good balance between men and women in the labs, or were there more men, or more women? I'm just interested in how that broke down.

AL: Oh, I know, yes. I'm glad you asked that, because we mentioned Dr. Dunn and there was another lady doctor, Dr. Bateman, B-a-t-e-m-a-n.

GC: I haven't heard that name.

AL: A hematologist. Yes.

GC: Do you remember her first name?

AL: Jean Bateman. And, let me see, about another woman. Let me think if there was another woman, another woman doctor. I remember one over in Building 6, Cecilia Dubnik,

D-u-b-n-I-k, I think was her name. She worked with Dr. Harold Morris, the Morris hepatomas.

GC: I've heard that name.

AL: I went over there to learn a technique. I'm trying to think what that was—a technique that she had developed over there in Building 6. That was a little different lab over there. I don't think they had quite the same comfort that I felt we had where I was. I don't know that I knew anybody else that worked in that lab.

But, of course, he became, he stayed here, you know, many years. And then when he retired, he went down to Howard University and they gave him space down there for all his slides and paraffin blocks. He was there. And when I came back in 1982, that was one of our jobs—to try to get that material into Dr. Stewart's Registry.

Dr. Sass and I went down three times. We had to work with the archivist and we had the archivist come to the Landow Building and chat with us on how to get this accomplished. And, unfortunately, that never occurred—and again it's the politics of the institutions— because he (Dr. H. Morris) had, of course, extremely valuable material. Morris hepatomas had been sent all over the world. But he had all the original materials, and they had all the paraffin blocks in boxes, sitting. If you know the old buildings at Howard University, as well as others, you know they had these huge windows, like this would be the window, and the sun is coming in all day, melting all the paraffin blocks, got like this [twisted, melted]. So a lot of it was ruined anyway. Then the slides were locked away in deep freeze rooms and under stairways in mold and dirt and things.

We tried to get something worked out to get those materials into the Registry, and it just never worked out. So, that's the fate of, you know, of research materials, unless they're protected. Of course, that's the value of the Registry was that in the Registry, Dr. Stewart was able to incorporate many of the pathological materials that were done in those early years in Building 8. We have slides from . . . well, actually, I'll tell you someone else whose materials we have is Dr. Upton, Arthur Upton, one of the NCI Directors.

GC: Really!

AL: Who, of course, did a lot of work with radiation all over the world and then went to New York as the Dean up there. But we have a lot of his materials in the Registry as well.

GC: I interviewed him.

AL: Did you?

GC: Yes. He's wonderful!

AL: Yes, a nice man. Yes. We had some of his materials.

GC: Now, was this Registry Dr. Stewart's idea, or your idea?

AL: No, Dr. Stewart's idea. No, I wasn't with the Registry when it was formed.

GC: Okay. Do you know when it was formed?

AL: March 19, 1970. And I have a paper on that, where is that? Goodness me [Attachment 1].

GC: That's okay. I might be able to find that.

AL: You should be able to find that, yes. I'll tell you who else's name was on there.

Dr. Saffiotti's name is on there. And Dr. Elisa Chavez, the technician. Oh, I know another lady. Oh. Dr. Margaret Deringer (Barrett, Miller).

GC: I've heard that name.

AL: Yes. And, of course, she died a few years ago as well.

GC: Now, was she a physician?

AL: She was a Ph.D. She had gone to Hood College. She's from the Eastern Shore originally, I think, and then she married a man in Building 8. Her maiden name was Deringer. Barrett, she married Morris Barrett, B-a-r-r-e-t-t, I think it was. Then he died and actually she had a second marriage near the end of her life, to a minister (Miller), but he was not a scientist. Dr. Stewart and I wrote her obituary. Here it is.

GC: That was on your CV.

AL: Yes, I don't think I gave you all my publications, though. Yes, so that would have been 1990. Miller—that was the third husband's name. But she was, she was one of Dr. Stewart's favorites and she did continue to work in the Registry until she had some illnesses. I worked with her when I came back here. She really was probably one of the people who did a lot of the organizing of the Registry materials.

GC: Yes. And she has died now.

AL: Yes, she's deceased, yes. So, she spent, I guess, all of her career with the Cancer Institute.

GC: Wow! There have been quite a few people who have done that.

AL: Yes. Oh, yes. Yes.

GC: Now, you were here, I guess you came in 1949, right?

AL: Yes.

GC: Was there still the division, or did you ever sense that there was a division between the people who had come from the Public Health Service in D. C. and those who had come from that Harvard group? I don't know if you knew that these two labs were brought together to form the Cancer Institute?

AL: Yes, sure.

GC: Had those people kind of intermixed by then, or was there some . . .

AL: Yes, I think they had. I didn't sense any of that when I came.

GC: Oh, I didn't mean rivalry.

AL: And, you know, being in a technical, you know, the technician level, I really was not aware of a lot of the political things, shall we say.

GC: Okay.

AL: It was much different when I came back. I was in a different category. Yes. No, I didn't sense any of that. I mean, I heard Dr. Stewart talk about it all these years, you know. He would always bring back all those things. Of course, his feeling was that they should never have put the Cancer Institute here with everything else. He felt we should have gone to—where was it he said? [Laughs] In the Midwest somewhere. Where is the famous clinic, psychiatric clinic? Ahh. Menninger Clinic in Topeka, Kansas, or somewhere. He felt we should have gone out in Podunk somewhere, you know, and have the Cancer Institute. [Laughs] I never knew why he thought that. But anyway, I guess maybe it would have, we would have been able to do more or something.

GC: More space or something.

AL: Of course, here, I mean, he had been at Harvard and everything.

GC: Right.

AL: [Laughs] So, I don't know.

GC: That's kind of funny.

AL: But, he came from a small town and I guess he knew the value of that versus, you know, the big city.

GC: Right, right.

AL: The squabbles. No, I don't think I ever sensed that, because of my position.

GC: So, did you ever meet the Institute Directors? Or did you have anything to do with any of the kind of higher-up administrators?

AL: Well, when I was there that first time, let's see.

GC: That would have been Carl Voegtlin [Case gives alternate pronunciations]. I've heard it pronounced both ways.

AL: Yes. I guess I met them or heard them. You know, they would always have meetings that were open to everyone. But I never really, no, I don't think I ever really *knew* any of them very well. I mean, a few Lab Chiefs, maybe. I suppose I really got to know a lot of them when I came back (later years), when I was on the Breast Cancer Task Force. That's how I got to know Dr. Alan Rabson [Attachment 22], and Dr. Kenneth Endicott, and people like that, was just because I was coming to those meetings. Of course, many of the Task Force were at NCI; e.g., Dr. Pietro Gullino, Dr. Mary Sears, whom I knew in Houston. She worked at M. D. Anderson Hospital with Dr. Nylene Eckles (Dr. Kirschbaum's wife). And Dr. D. Jane Taylor, who chaired the Experimental Biology Committee.

GC: Right. [Noise outside AL's house] Is someone out front?

AL: The trash, I think it's the trash people.

GC: Oh, okay.

AL: I really, there were a few administrators who were in the Hamsters. [Laughs]

GC: Really?! [Laughs] How big was the Hamsters? Was that pretty big?

AL: We must have had fifteen or twenty people, something like that, because I remember the pictures. Yes. It was fun. It was a lot of fun. As I remember, the performances were right in Building 1. Might have been in Wilson Hall, probably was in Wilson Hall.

GC: Oh, great! What part do you sing? Are you a soprano?

AL: I'm an alto.

GC: Alto.

AL: As you can guess. Yes, I think it's getting deeper all the time. [Laughs] I have a harder time getting to the top notes in church. I always kind of liked to ham it up. I guess I got that from my father. [Laughs]

GC: Was he a performer?

AL: Yes. He was a tennis and squash pro in New England and Washington—Wardman Park Hotel and University Club. He never had a piano lesson, but he could sit down and play the piano. And then he'd take my mother's plum pudding pan, which I can't show you, because I've given all my good copper pieces to one of my daughters. He'd put that underneath and tap, and then I'd stand back and hold the harmonica in his mouth.

GC: So he could be a one-man band?

AL: A one-man band. And then he'd get up and do his little tap dance, you know, his corny little dance that I learned. [Laughs]

GC: Sounds like fun.

AL: Oh, he was, well, I shouldn't say that. [Laughs] I won't say any more. [Laughs] Yes. Gosh, I'm thinking about things I haven't thought about in a long time.

GC: Well, you're answering every question I had written down to ask you. I really don't even have to ask you anything. Did you, how were resources in the, you said, in other places you had been, it was sometimes hard to get money or resources. How were they at the Cancer Institute, both when you were first here and when you came back?

AL: Well, when we, I remember particularly when we went to the Warwick Clinic, I mean, when I went into the lab when I first came in 1949, Dr. Alexander Symeonides had two technicians, Frank and Holdine Dameron, so everything was already in the lab. I just had to learn how to order the things, and both those technicians went elsewhere. When we went to the Warwick Clinic, we had to start from scratch. I remember opening catalogs and ordering anything I wanted to—all kinds of balances and all kinds of everything. Of course, there were a few things we had to make ourselves, like the stand we had that we hooked the tubing on when we fed and put the little gaskets on and so forth. We had to kind of put all those things together, but nobody ever told me I couldn't order anything. No.

GC: Wow!

AL: It *was* different when I came back. Yes. Someone said, you'll only have so much money and this is what you can spend.

GC: Budgets.

AL: It was budgeted, yes, so that was different. I don't think we suffered from it particularly. We never had a problem getting slides processed and so forth. Well, the one thing that did happen after I came back—and I can't tell you what year that was, I think it was only a few years, 1983 and 1984, in there—we had the tissues all done by the original tissue processing lab that Dr. Stewart actually built up. These girls had been there from the beginning and had developed a lot of the techniques, including a book with all these techniques written down. (Betty Sanders was in the Clinical Center; I did not know her. The "Animal Histology Procedures" manual was written by Barbara Coolidge and Ruby Haward in 1979 [Attachment 23]. (Dr. Lou Thomas was available to help.)

GC: Wow!

AL: And that's available. I know I have one of those. I probably have a couple of them in there right now. All of a sudden somebody decided they were going to move that lab to Frederick. So, it got moved to Frederick. I did know Barbara Coolidge. [Laughs] And then somebody decided to change the lab. I guess that's when they were going to turn it over to contract, and all these gals who were in the lab had to do early retirement. Dr. Stewart had a luncheon for all of them and us at O'Donnell's.

The Present Pathology Department had a big party for them. Barbara Coolidge retired to Thurmont [in Maryland]. And all those people were invited to the eighty-fifth and ninetieth birthday parties, and some of them did come, for Dr. Stewart. They thought the world of him, as well. He had everybody working for him. He was one of those people who could do that. Had the leadership qualities. But that was another thing he had done was develop that wonderful lab and the book. [Door bell rings. Interruption]

GC: It won't take me too much longer.

AL: Okay.

GC: But I wanted to ask you about the National Cancer Act of 1971. Were you aware of that at all?

AL: Well, let's see. Yes. Let me think about that. That wasn't Rauscher. Was that Nixon?

GC: That was Nixon.

AL: Yes, Nixon.

GC: And Carl Baker was the Director at the time.

AL: And Baker was the Director. Yes, that was Nixon. Well, see, I was moving from, I was in Houston then, yes.

GC: Yes. It looks like you were just moving to the Medical College of Georgia in 1971.

AL: Yes, yes, yes. So I really can't say much about that.

GC: It affected the NCI so greatly, but I'm still not clear on how it affected cancer research in general, you know, how people reacted to it.

AL: I really don't think I can answer that. I mean, I will tell you that over the years, Bob, my *ex*-husband now, and I continued to get grants as Dr. Kirschbaum had. Dr. Kirschbaum started a program where we had what we called split-year medical students. The medical students in their second year could take the second year in two years and start some research and they were able to teach. But most of this money came from NCI. Now, we're talking 1950s, the 1950s and 1960s. He [Kirschbaum] died in 1958. My ex-husband became Chairman and we continued that program, including doctorate students as well. Actually, my husband got the doctorate on that split-year arrangement. But a lot of this money was coming from NCI for these students to do this program.

It did become harder to get that money, but I really can't tell you when. Of course, we continued to get research money, even when we went to Georgia, and it became very difficult in Ohio. Never did end up getting very much there with anybody. But that's another story. So I don't know, with that program.

But I know early on the NCI money was available for doing this, and it was a boon to our students who wanted to do some research and wanted to teach. Then they would graduate with two degrees, an M.D. and an M.S. and/or Ph.D. if they stayed longer. And we had a number of students that did that, and worked with the mouse colony. Yes. Did their research on our mice. And, of course, some of those tissues also went into the Registry.

GC: What was your favorite thing about working at the NCI?

AL: Favorite thing about working at the NCI? Ahh. Well, I've always loved working with the animals. I guess I'd have to say that. And just a matter of that there was always something new and challenging to find out, to learn, and that you could teach someone else and spread the word. I guess that's what I always liked about the atmosphere. It's academic.

GC: Really!

AL: Yes. And, I guess, the publications that I was fortunate enough to accomplish, especially the chapters. I don't know if you wanted any list of these.

GC: At some point that would be really nice, but we're not going to have time.

AL: Right, okay, because I have some extra copies of those.

GC: Okay.

AL: But it made you do research, made you go to the library. And the NIH Library was *fabulous*! That was another *great* part of working there. It was fabulous early on and it was fabulous when I came back. In order to live with the traffic on [Interstate] 270, I was often down at the NIH Library at quarter of seven waiting for the doors to open, so I could get in there and do my thing, but I also had a parking place! [Laughs] But, the librarians would get articles, books, would do searches, would even translate articles. And then the National Library of Medicine, of course, they would just get anything you wanted.

GC: Isn't that wonderful!

AL: And doing the searches and all of that. And I find that resource was . . . and even when I went to Ohio, by the way, and we started our library, we could still work through the National Library of Medicine and get articles. That's how I was able to continue to write chapters when I was elsewhere, was through that mechanism. So, I just can't say enough about the Library.

GC: Wow! That's good to know.

AL: Yes. Wonderful. And the other resources, of course, too, and photography, too. When I was doing the chapters that I worked on when I came back as a fellow, an expert, and a volunteer, I had all those resources available for photography. And that's just invaluable when you're trying to do that work. Thanks to Larry Ostby and Ricardo Dreyfuss for excellent photography. The NIH is just . . . I don't have bad things to say about it. [Laughs]

GC: I was just going to ask you was there anything you didn't like about working there?

AL: Oh, no, not really. It was different when I came back the second time, but that's just the way the world has changed. And, you know, if you had a problem, something not going just right . . . I know one of the pathologists, Dr. [William G.] Bill Banfield, who worked there before I came back. He came over and worked with us when I was there. We wanted to go through his materials, mostly sections from hamsters, which he entered into the Registry. He had done a lot of the electron microscopy, as well. But he would calm me down by saying, "Well, Annabel, you know nothing's changed. It's always been like this at NIH." [Laughter] Bill, his wife Jo, and I continue to lunch together, host Dr. Ohmori when he visits, and laugh about NIH [Attachment 24].

GC: Is there anything I haven't asked you that you would like to add?

AL: I don't think so. I think you've covered a lot—things I hadn't thought about in a long time.

GC: Well, you covered my questions so well. I've only asked you about three questions, because I've checked off everything you've covered.

AL: Oh, okay.

GC: So, I think we're right on track.

AL: Okay.

GC: I'm very interested in the role of women at NIH and NCI. I didn't know if you had anything else to say about what it was like to be a woman there? If it was . . .

AL: You know, someone else that should be mentioned would be Dr. Elizabeth Weisburger.

GC: Weisburger?

AL: Elizabeth Weisburger. Now, I did not work with her. She and her husband (now ex-) [John] of course, were biochemists and they were in Building 6, I guess. I didn't know them in the early days, but I kept up with their work because it was related to things I was interested in, carcinogenesis. Then when I went to a meeting in Toledo, an anatomists' meeting (1979, I think), they had her as a speaker and so I renewed my relationship with her. Of course, she thought a lot of Dr. Stewart as well. But she was an outstanding researcher and is still respected very highly today. She has retired but she, I think, still does consulting. She is internationally respected and I think always was at the Cancer Institute. So she would be one.

I think there were outstanding women in those years when I wasn't here. But I think Dr. Deringer always was highly respected, and I know at the cancer meetings always was. She would have been one of those in the early days. I'd have to be thinking about that. I'm sure there were others. [Pause] If I'd ever go into my boxes, I could probably find a lot of other stuff. I've given you enough to think about today. Dr. Ruth Marwin and Dr. Katherine Sanford, both in Building 6—long careers at NCI, outstanding research.

GC: Yes, you've given me a lot. I'm going to go ahead and stop the tape for today. We've talked for two hours and it's probably time for us to rest.

AL: Sure. Yes. Okay.

GC: Thank you. This ends the interview.

[End Side A, Tape 2]

INDEX